ENROLLED SENATE
BILL NO. 621

By: Monson of the Senate

and

Winchester and Nance of the House

An Act relating to public health and safety; amending 63 O.S. 2001, Section 330.97, as renumbered by Section 11, Chapter 374, O.S.L. 2002 (63 O.S. Supp. 2002, Section 1-2522), which relates to the Trauma Care Assistance Revolving Fund; modifying method of disbursement of certain funds; creating the Task Force on Hospital Emergency Services and Trauma Care; providing for task force duties, composition, appointment of members, first meeting, administrative support and travel reimbursement; requiring a report of findings and recommendations to specified entities by certain date; providing for noncodification; and declaring an emergency.

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 1. AMENDATORY 63 O.S. 2001, Section 330.97, as renumbered by Section 11, Chapter 374, O.S.L. 2002 (63 O.S. Supp. 2002, Section 1-2522), is amended to read as follows:

Section 1-2522. A. There is hereby created in the State Treasury a revolving fund for the State Department of Health to be designated the "Trauma Care Assistance Revolving Fund". The fund shall be a continuing fund, not subject to fiscal year limitations, and shall consist of all monies received by the State Department of Health from monies apportioned thereto for purposes of this section. All monies accruing to the credit of the fund are hereby appropriated and may be budgeted and expended by the Department as follows:

1. Ninety percent (90%) of such monies shall be used to reimburse recognized trauma facilities and licensed ambulance services for uncompensated trauma care expenditures as documented in the statewide emergency medical services and trauma analysis system developed pursuant to the provisions of Section 1-2511 of this title; <u>provided, however, any monies used for the treatment of Medicaid eligible patients that are subsequently used to establish federal matching fund requirements shall also be reimbursed to eligible trauma facilities and licensed ambulance services;</u> and

2. Ten percent (10%) of such monies shall be used by the Department in the furtherance of its powers and duties set forth in the Oklahoma Emergency Response Systems Development Act.

Expenditures from the fund shall be made upon warrants issued by the State Treasurer against claims filed as prescribed by law with the Director of State Finance for approval and payment.

B. The State Board of Health shall establish by rule a formula and procedure for the distribution of funds for uncompensated trauma care that shall provide for the allocation of funds to hospitals and ambulance services.

SECTION 2. NEW LAW A new section of law not to be codified in the Oklahoma Statutes reads as follows:

A. Recognizing that the availability and delivery of hospital emergency services and trauma care by community hospitals is a matter of statewide concern and the Legislature's responsibility to the citizens of this state to ensure the availability and delivery of adequate emergency services and trauma care in all areas of the state, there is hereby created to continue until July 1, 2004, the Task Force on Hospital Emergency Services and Trauma Care.

B. The Task Force shall study and assess data on the availability and delivery of hospital emergency services and trauma care in this state. In performing its duties, the Task Force shall consider:

1. The types and current availability of emergency services and trauma care provided by hospitals in this state;

2. The effect of the establishment and operation of new hospitals and ambulatory surgical centers on the operations, staffing, financial viability, and medicaid service delivery and indigent care capacity of existing community hospitals providing twenty-four hour emergency services and trauma care;

3. The number of citizens requiring twenty-four hour emergency services and trauma care within the past three years and the geographical distribution of facilities that provided such care;

4. The levels of care provided by all ambulatory surgical centers and new hospitals constructed since 1995; and

5. A review of patient referrals or admissions to hospitals or ambulatory surgical centers by physicians with direct or indirect financial interest in such facilities.

C. 1. The Task Force shall be composed of twenty-one (21) members, all of whom shall be either affiliated with hospitals licensed in this state, emergency medical service providers, or licensed practitioners with active hospital appointments.

2. The Task Force members shall be appointed as follows:

a. the Governor shall appoint:

(1) the Cabinet Secretary for Health, who shall chair the Task Force,

(2) two (2) State Board of Health members,

(3) two (2) individuals with experience in health planning, provided such individuals shall not presently be employed by any other Task Force member, and

(4) two (2) payors, one representing a statewide preferred provider organization and one representing a Medicaid contracting health maintenance organization, and

b. the President Pro Tempore of the Senate and the Speaker of the House of Representatives shall each appoint:

(1) a member from their respective chambers,

(2) one member who is affiliated with an urban hospital with one hundred (100) or more licensed beds,

(3) one member who is affiliated with a rural hospital with fewer than one hundred (100) licensed beds,

(4) one member affiliated with an urban hospital constructed since 1995,

(5) one member affiliated with an ambulatory surgical center,

(6) one member who is an emergency room physician with active staff privileges in a level II or higher trauma and emergency operative services hospital,

(7) one member who is a trauma surgeon with active staff privileges in a level II or higher trauma and emergency operative services hospital, and

(8) one member who is an ambulance service provider; provided, however, the President Pro Tempore shall appoint an urban ambulance service provider and the Speaker shall appoint a rural ambulance service provider.

D. The Cabinet Secretary for Health shall convene the first meeting of the Task Force on or before July 1, 2003. The State Department of Health shall provide administrative support for the Task Force. Members shall serve without compensation but shall be reimbursed by the Department for travel expenses related to their service as authorized by the State Travel Reimbursement Act.

E. The Task Force shall submit, not later than February 1, 2004, to the Governor, President Pro Tempore of the Senate and the Speaker of the House of Representatives a report of its findings and recommendations for changes in existing statutory provisions related to hospitals and ambulatory surgical centers and the delivery of hospital emergency services and trauma care.

SECTION 3. It being immediately necessary for the preservation of the public peace, health and safety, an emergency is hereby declared to exist, by reason whereof this act shall take effect and be in full force from and after its passage and approval.

Passed the Senate the 21st day of May, 2003.

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Presiding Officer of the Senate

Passed the House of Representatives the 27th day of May, 2003.

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Presiding Officer of the House
of Representatives